



ORGANIC SYSTEM PLAN – COFFEE ROASTERS

To be completed by an operation that roasts organic coffee and does not process additional organic products.

Business Name:	Certification Number:
Name and Title of Individual Completing this Form:	Date:

Section I. Pest Management

[NOS 205.271]

Tip! USDA organic regulations outline a step approach to pest control. Certified facilities **must** implement pest management that focuses on good sanitation and preventative practices **before** use of a pest control material. Environmental factors, mechanical, or physical controls that use non-synthetic substances may also be used. If preventative measures are not effective, a synthetic substance not on the National List may be used, provided the Olympia office approves use of the substance, method of application, and measures taken to prevent contact with ingredients or organic products. **Use of pest control products must be documented and included as part of the organic system plan.**

- What type of pest management system does your facility use?
☐ In-house. Name of responsible person:
☐ Contract pest control service. Business name, address, phone number:
- Check all pest problems at your facility.

<input type="checkbox"/> No pest problems	<input type="checkbox"/> Flying insects	<input type="checkbox"/> Birds
<input type="checkbox"/> Crawling insects	<input type="checkbox"/> Rodents	<input type="checkbox"/> Other (specify):
- Check all pest management practices used at your facility.

<input type="checkbox"/> Good sanitation and clean up	<input type="checkbox"/> Mechanical traps	<input type="checkbox"/> Diatomaceous earth
<input type="checkbox"/> Removal of exterior habitat/food sources	<input type="checkbox"/> Ultrasound/light devices	<input type="checkbox"/> Pyrethrum
<input type="checkbox"/> Clean up spilled product	<input type="checkbox"/> Release of beneficials	<input type="checkbox"/> Rotenone
<input type="checkbox"/> Sealed doors and/or windows	<input type="checkbox"/> Sticky traps	<input type="checkbox"/> Boric acid
<input type="checkbox"/> Air curtains	<input type="checkbox"/> Electrocutors	<input type="checkbox"/> Crack and crevice spray*
<input type="checkbox"/> Screened windows/vents	<input type="checkbox"/> Pheromone traps	<input type="checkbox"/> Fumigation*
<input type="checkbox"/> Freezing treatments	<input type="checkbox"/> Vitamin baits	<input type="checkbox"/> Fogging*
<input type="checkbox"/> Heat treatments	<input type="checkbox"/> Other (specify):	

Tip! You must implement preventative pest control practices before the use of an input material. Records about all practices must be available during your inspection.
*The use, frequency, and method of application of synthetic substances must be approved by the Olympia office.



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4. Submit details on fumigation, fogging, or sprays used at your facility:

☐ None Used

Generic and Brand Name of substance	Where is the substance used?	Frequency of use	Method of application	Name of document use is recorded on.

4a. Explain how organic products and packaging are protected from exposure to the above prohibited materials.